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PATENT APPLICATION FEE DETERMINATION RECORD ** Substitute for Form PTO-875										Appliestor & Docket Number / 01825, 246		
APPLICATION AS FILED PART I (Column 1) (Column 2)								SMALL ENTITY				R THAN ENTITY
FOR			NUMBER FILED		N	NUMBER EXTRA		RATE (\$)	FEE (\$)]	RATE (\$)	FCE (\$)
	SIC FEE CFR 1.16(a), (b), or	(c))	•					10012 (0)	1 LL (\\psi)	1	NATE (#)	FEE (\$)
SEARCH FEE (37 CFR 1.16(k), (i), or (m))												
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))							1					
(37	TAL CLAIMS CFR 1.16(i))			minus 2	20 = •			х =		OR	x =	
	EPENDENT CLI CFR 1.16(h))	AIMS	minus 3 =		3 = •		7	x ' =		1	х =	
APPLICATION SIZE FLE (37 CFR 1.16(s))			If the specification and sheets of paper, the ap is \$250 (\$125 for smail additional 50 sheets or 35 U.S.C. 41(a)(1)(G) a		he applications smail entity) ets or fraction (G) and 37	polication size fee due entity) for each fraction thereof. See and 37 CFR 1.16(s).		u, et#				
MU	LTIPLE DEPEND	ENT CL	AIM PRES	SENT (37	CFR 1.16(j))		Ĺ		-] _		· · · · · · · · · · · · · · · · · · ·
• If	• If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL			·-TOTAL·	-
1	APPLICATION AS AMENDED - PART II										OTHER	R THAN
	-d'1-05	/-() (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST						SMALLE	NTITY	OR I	SMALL	ENTITY
₹		REM.	AINING TER IDMENT		NUMBER PREVIOUS PAID FOR	PRESENT LY EXTRA		RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIQUAL FEE (\$)
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볾	Independent (37 CFR 1.16(h))	<u> </u>	<u></u>	Minus	3_	! = (· 100 =		CR	x-200=	`
ΑŒ	Application Size Fee (37 CFR 1.16(s))											
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))							180		OR -	360	
								TOTAL		ńέ	TOTAL	42 - 41
		(Colu	mn 1)		(Column	2) (Column 3)						
ENDMENT B		REMA	AIMS AINING TER DMENT		HIGHEST NUMBER PREVIOUS PAID FOR	PRESENT LY EXTRA		RATE (S)	ADDI- TIONAL · FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
	Total (37 CFR 1.16(i))	٠		Minus	**	=	7	x =.		OR	х =	
	Independent (37 CFR 1.16(h))	•		Minus	***	=	1	x =		OR	x =	-
Σ	Application Size Fee (37 CFR 1.16(s))						1					
Α	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR		
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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